	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 98 / 371 (check only one)
			for each category of the	X 11a 11b 11c 11d
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	Any information copied from such Reports and S	Statements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions
Ļ	or for commercial purposes, other than using the	e name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Perriello for Congress			
^	Full Name (Last, First, Middle Initial)			Data of Descipt
Α.	Peter Arthur Kannam Mailing Address 211 Hawthorne Rd			Date of Receipt
				10 30 2010
	City State Zip Code			Transaction ID: C6337400
	Baltimore	MD	21210-2503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer new leaders	Occupation		
	Receipt For: 2010	education	on Cycle-to-Date ▼	
	Primary X General	Licotion	·	1
	Other (specify) ▼		450.00	
_	Full Name (Last, First, Middle Initial)			
B.	Michael Kass			Date of Receipt
	Mailing Address 1630 R St NW			M M / D D / Y Y Y Y
	Apt 403 City	State	Zip Code	1 0 2 8 2 0 1 0 Transaction ID: C6332978
	Washington	DC	20009-6459	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		50.00
	Name of Employer Hogan Lovells US LLP	Occupation	on	
		Attorney		
	Receipt For: 2010 Elec		Cycle-to-Date ▼	,
	Other (specify)		211.00	
_				
C.	Full Name (Last, First, Middle Initial) Michael Kass			Date of Receipt
	Mailing Address 1630 R St NW Apt 403			10 30 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C6337905
	Washington	DC	20009-6459	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Hogan Lovells US LLP	Occupation Attorney		
	Receipt For: 2010	Election (Cycle-to-Date ▼	
	Primary X General Other (specify) ▼		211.00	1
	Uniter (Specify)	0 0		1
Γ		1		
	SUBTOTAL of Receipts This Page (optional)			400.00
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TOTAL This Period (last page this line number only)